							A	pplication	or Do	ocket Num	per	
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999							ء۔	09	5	779	80	
		SMA Tyf		ENTITY	OR	OTHER SMALL						
FC)R	NUM	BER FILED	NUMBER	EXTRA	RAT	Ε	FEE		RATE	FEE	
ВА	SIC FEE							345.00	ÒR		690.00	
ТО	TAL CLAIMS	-40	minus 2	20= 20		X\$ 9	9=	`	OR	X\$18=.	360	
IND	EPENDENT CL	AIMS	9 minus 3 = 1*			X39)=		OR	X78=	18	
MULTIPLE DEPENDENT CLAIM PRESENT					+130	n_			+260= -	1		
* If	the difference	,			OR	TOTAL	1 <i>F</i>)C					
CLAIMS AS AMENDED - PART II									OR 3	OTHER	THAN	
	(Column 1) (Column 2) (Column 3				(Column 3)	SMA	LL I	ENTITY		SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	•	Minus	**	=	X\$.	9=		OR	X\$18=	10	
	Independent		Minus /	***]=	X39)= 		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130	<u> </u>	-	OR	+260=	e Euskil	
A Committee and the second of									OR	TOTAL	A CONTRACTOR	
3	1.	(Column 1	· .: .	(Column 2)	(Column 3)	ADDIT.	FEE		JON.	ADDIT. FEE		
AMENDMENT B	7.34	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT			ADDI-			ADDI-	
	in the second	AFTER AMENDMEN		PREVIOUSLY PAID FOR	EXTRA	RAT	E	TIONAL FEE		RATE	TIONAL FEE	
	Total	****	Minus	**	= .	X\$ 9)= -		OR	X\$18=	1	
	Independent		Minus	***	=	X39	·)=			X78=		
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					 			OR	9		
	a american de la companya de la comp	1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			+130			OR	+260=		
	· .		t			ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)	(Column 2)	(Column 3)		••				Å	
AMENDMENT C		REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9)= ·		OR	X\$18=		
	Independent	*	Minus	***	=	X39			OR.	X78=		
	FIRST PRESE	NTATION OF	MULTIPLE DEI	PENDENT CLAIM			_					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+260=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL ADDIT. FEE	L	
	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

FORM **PTO-875** (Rev. 12/99)